

**Discovering the capabilities of
ageing persons who are born abroad:**
Crossing norms, moving health promotion forward

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- I. Lood Q, Häggblom-Kronlöf G, Dahlin-Ivanoff S. Health promotion programme design and effectiveness in relation to ageing persons who are culturally and linguistically diverse: a systematic literature review and meta-analysis. *Submitted for publication*
- II. Lood Q, Dahlin-Ivanoff S, Dellenborg L, Mårtensson L. Health-promotion in the context of ageing and migration: A call for person-centred integrated practice. *International Journal of Integrated Care*. 2014;Mar3(14):e004
- III. Lood Q, Häggblom-Kronlöf G, Dellenborg L. Embraced by the past, hopeful for the future: meaning of health to ageing persons who have migrated from the Western Balkan region to Sweden. *Accepted for publication in Ageing & Society, December 2014*
- IV. Lood Q, Gustafsson S, Dahlin-Ivanoff S. Bridging barriers to health promotion: a feasibility pilot study of the "Promoting Aging Migrants' Capabilities" study. *Submitted for publication*



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Discovering the capabilities of ageing persons who are born abroad:
Crossing norms, moving health promotion forward

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ABSTRACT

To improve the possibilities for the whole population to take control over their health is an important goal for health promotion and public health. Yet, with improved possibilities for international migration and extended life spans, there are more and more people who are considered less capable to reach such a goal. Current normative structures impede upon the possibilities for ageing persons who are born abroad to execute what they consider valuable for their health, and confronting such structures is a critical issue from an ethical perspective, but increasingly also from a public health perspective. Therefore, the overarching aim of this thesis was to explore ethical and empirical points of departure for health promotion in relation to ageing persons who have experienced international migration. **Methods:** A mixed-methods approach was applied, combining qualitative and quantitative methods to gather and analyse data from eight randomised controlled trials (study I), 16 health professionals (study II) and 55 ageing persons who had experienced international migration (studies III and IV). The analyses were narrative descriptive, interpretive and statistical, presenting four distinct stages of the development of a health promotion programme for ageing persons who have migrated to Sweden. **Results:** On a comprehensive level, the findings serve as a reminder of the innate dignity of each human being. Focus should lie on solving problems that *actually* exist, instead of solving those that are *believed* to exist. Based on the findings, study I suggests that health promotion programmes should involve culturally and linguistically modified activities and health information, and that all content should be professionally provided with a person-centred approach. Study II visualises social networks and maintained bonds to the country of birth as both facilitators and barriers for health promotive work, influencing the expectations on health and support over the ageing process. However, interpersonal differences were described as equally important to attend to in order to build up a mutual understanding based on trust and respect. Study III describes the meaning of health to ageing persons who are born abroad, and suggests that health promotion programmes should aim to promote the retrospective and prospective process of exercising control over one's life, daily activities, and social commitments. Finally, study IV visualises how health promotion programme feasibility could be improved by pragmatic and flexible approaches, and acknowledgement on how people convert resources for health into actual achievements. **Conclusion:** Searching for how to identify, and reach, appropriate health promotion goals in the context of ageing and migration, the major finding is the recognition of the complex and dynamic interplay between personal choice and normative power, leading to a deeper understanding of how to diminish health-care inequities. Moving beyond the norms on what it means to be a capable person, and what is considered a good and healthy life, the capabilities of ageing persons who are born abroad were discovered, leaving negatively charged characteristics of ageing and migration in the foreground. Providing tools to confront, and deal with, normative structures, the findings equip health professionals, decision makers and researchers with possibilities to accept, and embrace the notion of all human beings as persons with capabilities.

Keywords: Emigration and immigration, delivery of health-care, implementation, inequities, health, mixed-methods, person-centredness

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